FORM D RECEIVED OCT 1 9 2005 185

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1342233

SEC USE ONLY Prefix Serial

Date Received

Name of Offering ([] check if this is an amendment	and name has change	d, and indicate chang	e.)		
Limestone Acquisition and Developm	ent Fund III, L.P.		····		
Filing Under (Check box(es) that apply): Type of Filing: [X] New Filing	[] Rule 504 [] Amendment	[] Rule 505	[X] Rule 506	[] Section 4(6)	[]ULOE
	A. BASIC	IDENTIFICATION	ON DATA		
1. Enter the information requested about	it the issuer	· · · · · · · · · · · · · · · · · · ·		11100111111	
Name of Issuer ([] check if this is an amendm	ent and name has ch	anged, and indicate	change.)		
Limestone Acquisition and Development	Fund III, L.P.				5068998
Address of Executive Offices (Number and Str	eet, City, State, Zip	Code)		Telephone Number (Including Area Code)
181 West Madison Street, Suite 3750, Cl				(312)	122-1720
Address of Principal Business Operations (Nu (if different from Executive Offices)	mber and Street, Cit	y, State, Zip Code)		Telephone Number (Including Area Code)
Oil and Gas Exploration and Developme	ent				
Brief Description of Business				PROCE	SSED
				PCT 2 6	
	nited partnership, ali ited partnership, to b		[] other (pleas	e specify): THOMS FINANC	ON AL
Actual or Estimated Date of Incorporation or C		MONTH August	20	<u>/EAR</u> 005 [X] Ac	etual [] Estimated
Jurisdiction of Incorporation or Organization:			e abbreviation for S her foreign jurisdic		[DE]
GENERAL INSTRUCTIONS FEDERAL: Who must file: All issuers making an of 77d(6).	fering of securities in re	eliance on an exempti	on under Regulation I	O or Section 4(6), 17 CFR	230.501 et seq. or 15 U.S.C.
When to file: A notice must be filed no later than 1 Commission (SEC) on the earlier of the date it is recit was mailed by United States registered or certified	eived by the SEC at th	ale of securities in the e address given below	e offering. A notice is v, or if received at that	deemed filed with the U. t address after the date on	S. Securities and Exchange which it is due, on the date
Where to file: U.S. Securities and Exchange Commi	ssion, 450 Fifth Street,	, N.W., Washington,	D.C. 20549.		
Copies Required: Five (5) copies of this notice must the manually signed copy or bear typed or printed si		one of which must be	e manually signed. An	y copies not manually sig	ned must be photocopies of
Information Required: A new filing must contain a information requested in Part C, and any material cha					
Filing Fee: There is no federal filing fee.					
STATE: This notice shall be used to indicate relian and that have adopted this form. Issuers relying on U If a state requires the payment of a fee as a precondithe appropriate states in accordance with state law.	LOE must file a separa tion to the claim for th	te notice with the Sec e exemption, a fee in	urities Administrator i the proper amount sh	in each state where sales a all accompany this form.	re to be, or have been made.
		ATTENTION			
Failure to file notice in the appropriate states w	ill not result in loss	of the federal exem	ption. Conversely,	failure to file the appro	priate federal notice will

not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC	IDENTIFICATION DAT	Δ

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

* Each general and managing partner of partnership issuers; and Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter [x] Beneficial Owner [x] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Robert C. Bridges
Business or Residence Address (Number and Street, City, State, Zip Code)
181 W. Madison Street, Suite 3750, Chicago, IL 60602
Check Box(es) that Apply:[]Promoter [x]Beneficial Owner [x] Executive Officer []Director []General and/or Managing Partner
Full Name (Last name first, if individual)
Thomas S. Bridges
Business or Residence Address (Number and Street, City, State, Zip Code)
181 W. Madison Street, Suite 3750, Chicago, IL 60602
Check Box(es) that Apply:[]Promoter [x]Beneficial Owner [x]Executive Officer []Director []General and/or Managing Partner
Full Name (Last name first, if individual)
John P. Huber
Business or Residence Address (Number and Street, City, State, Zip Code)
181 W. Madison Street, Suite 3750, Chicago, IL 60602
Check Box(es) that Apply:[]Promoter []Beneficial Owner []Executive Officer []Director [X] General and/or Managing Partner
Full Name (Last name first, if individual)
Limestone Energy Managers, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
181 W. Madison Street, Suite 3750, Chicago, IL 60602
Check Box(es) that Apply:[]Promoter []Beneficial Owner []Executive Officer []Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Durings on Parishan Address Olivebra and Caron City, Casta Zin Cada)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:[]Promoter []Beneficial []Owner []Executive Officer []Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:[]Promoter []Beneficial Owner []Executive Officer []Director []General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

						B. INF	ORMAT	TION AB	OUT OF	FERIN	3			
١.	Has the	issuer so	old, or do	es the issi	uer intend	d to sell, t	o non-ac	credited i	nvestors i	n this of	fering?			Yes No [] [X]
			А	nswer als	o in App	endix, Co	olumn 2, i	if filing u	nder ULC	DE.				
2.	What is	the mini	imum inv	estment t	hat will b	e accepte	d from ar	ny individ	lua!?					\$ 100,000
3.						-								Yes No
														[X] []
4.	of the b	toker or (dealer, li	uested for solicitation or solicitation or age more than that broke	11ve (5) 1	oersons to	in conne ealer regi be listed	or will be ection with istered wi l are assoc	paid or gi h sales of th the SE- ciated per	iven, dire securitie C and/or sons of si	etly or in s in the c with a sta ich a brol	directly, a ffering. I atte or state or dea	any commission f a person to be es, list the name ler, you may set	
Full N	ame (Las	t name fi	irst, if ind	ividual)									· 	
Busine	Uhln	ann Pric	e Securiti	es, L.L.C Number a	nd Street	City. Sta	ite. Zin C	ode)						
2 40				te 1348, (•	•	,000)						
Name	of Assoc	iated Bro	ker or De	aler										
States	James in Which	Person	Listed Ha	s Solicite	d or Inter	nds to So	icit Purc	hasers						
(C	heck "All [AL] [IL] [MT] [RI]	States" ([AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	individua [AR] [KS] [NH] [TN]	l States) . [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI) [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	[X] All States
Full	Varne (La	st name f	irst, if inc	lividual)										
Busine	ess or Re	sidence A	ddress (?	Number a	nd Street	, City, Sta	te, Zip C	Code)						· · · · · · · · · · · · · · · · · · ·
Name	of Assoc	iated Bro	ker or De	ealer										
States (C	in Which heck "Al	Person States"	Listed Ha	s Solicite individua	d or Inter States)	nds to So	licit Purc	hasers						[] All States
,	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	[] All States
FullN	ame (Las	t name fi	rst, if ind	ividual)										
Busine	ess or Re	sidence A	Address (1	Number a	nd Street	, City, Sta	ite, Zip C	Code)		··				
Nome	of Associ	oted Dec	ker or De	olor.										
ivanie	of Assoc	lateu Bro	ikei oi Di	caiti										
				s Solicite individua		nds to So	licit Purc	hasers						[] All States
, -	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
				(Use b	lank shee	t, or copy	y and use	additions	al copies	of this sh	eet, as ne	cessary.)		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	<u>-0-</u>
	Equity	\$0-	\$
	[] Common [] Preferred		
	Convertible Securities (including warrants)	\$0	\$ <u>-0-</u>
	Partnership Interests	\$0-	S0
	Other (Specify) Partnership interests	\$ 20,000,000	\$ -0-
	Total	\$ 20,000,000	s -0-
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	* <u></u>
	•		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchase on the total lines. Enter "0" if answer is "none" or "zero."	Number of Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0-	\$0
	Non-accredited Investors	-0-	\$ <u>-0-</u>
	Total (for filings under Rule 504 only)	N/A	S <u>N/A</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505 N/A		s
	Regulation A		\$
	Rule 504 N/A		S
	Total		\$
4.	a. Furnish a statement for all expenses in connection with the issuance and distribution of the securi Exclude amounts in relating solely to organization expenses of the issuer. The information may be given contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the	as subject to future	
	Transfer Agent's Fees	[]	\$
	Printing and Engraving Costs	[]	\$
	Legal Fees	[]	\$
	Accounting Fees	[]	\$
	Engineering Fees (Geological and Geophysical Costs)	[]	\$ <u>-0-</u>
	Sales Commissions (specify finders' fees separately)	[]	\$_200,000
	Other Expenses (identify)	[]	\$
	Total	[]	\$_200,000

	C. OFFERING PRIC	E, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate of expenses furnished in response to Part C-Question 4.	ffering price given in response to Part C-Question 1 and total a. This difference is the "adjusted gross proceeds to the issuer."		\$_19,800,000
5,	purposes shown. If the amount for any purpose is no	ceeds to the issuer used or proposed to be used for each of the ot known, furnish an estimate and check the box to the left of t equal the adjusted gross proceeds to the issuer set forth in	Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		[]\$0	[]\$0-
	Purchase of real estate		[]\$0	[]\$0
	Purchase, rental or leasing and installation of	machinery and equipment	[]\$0	[]\$0-
	Construction or leasing of plant buildings and	1 facilities	[]\$0	[]\$0
	Acquisition of other businesses (including the this offering that may be used in exchange for issuer pursuant to a merger)	e value of securities involved in r the assets or securities of another	[]\$0	[]\$0
	Repayment of indebtedness		[]\$0-	[]\$0-
	Working capital		[]\$0-	[]\$0-
		gas properties	[]\$ <u>-0-</u>	[]\$ <u>19,800,000</u> []\$ <u>19,800,000</u>
	Total Payments Listed (column totals added)		[x] \$ <u>19,800,0</u>	00
		D. FEDERAL SIGNATURE		
n	e issuer has duly caused this notice to be signed by the undertaking by the issuer to furnish to the U.S. Securit n-accredited investor pursuant to paragraph (b)(2) of	undersigned duly authorized person. If this notice is filed under ties and Exchange Commission, upon written request of its staff, Rule 502.	r Rule 505, the followi the information furnis	ng signature constitutes thed by the issuer to any
_	(D.: 1 T)		· · · · · · · · · · · · · · · · · · ·	
	Limestone Acquisition and Development Fund III, L.P.	Signature	7th Oct 26	70 5
١	lame of Signer (Print or Type)	Title of Signer (Print or Type)		
N	Ar. Thomas Bridges	Managing Member of the General Partner, Limestone Energy	Managers, LLC	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

	E. STATE SIGNATURE
1.	Yes No Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

	1	
Issuer (Print or Type)	Signature	Date 11th Act 2005
Limestone Acquisition and Development Fund III, L.P.	m/V//	11 04 200
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Mr. Thomas Bridges	Managing Member of the General Partner, I	Limestone Energy Managers, LLC

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

I		2	3			4		5		
	non-acc invest St	o sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item I)	Туре	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Units of Partnership Interests	Number of accredited investors	Amount	Number of non-accredited investors	Amount	Yes	No	
AL		х	\$20,000,000				,		Х	
AK		х	\$20,000,000						Х	
ΑZ		х	\$20,000,000						Х	
AR		х	\$20,000,000						Х	
CA		х	\$20,000,000						Х	
со		Х	\$20,000,000						х	
СТ		х	\$20,000,000						х	
DE		х	\$20,000,000						Х	
DC		х	\$20,000,000						X	
FL		х	\$20,000,000						Х	
GA		х	\$20,000,000						Х	
ні		х	\$20,000,000						Х	
1D		х	\$20,000,000						Х	
IL		х	\$20,000,000						Х	
ĪΝ		Х	\$20,000,000						Х	
IA		х	\$20,000,000						х	
KS		х	\$20,000,000						х	
KY		х	\$20,000,000						х	
LA		Х	\$20,000,000						Х	
ME		х	\$20,000,000						Х	
МD		Х	\$20,000,000						х	
MA		х	\$20,000,000						х	
MI		х	\$20,000,000						Х	
MN		Х	\$20,000,000						Х	
MS		х	\$20,000,000						х	
МО		х	\$20,000,000						х	

APPENDIX

1		2	3			4			5
	non-acc invest St	o sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Туре	e of investor and (Par	amount purchased in t C-Item 2)	ı State	State UL attach exp waiver	cation under OE (if yes, blanation of granted) L-Item 1)
State	Yes	No	Units of Partnership Interests	Number of accredited investors	Amount	Number of non-accredited investors	Amount	Yes	No
МТ		Х	\$20,000,000						
NE		х	\$20,000,000						
NV		х	\$20,000,000						
NH		х	\$20,000,000						
NJ		Х	\$20,000,000						
NM		Х	\$20,000,000						
NY		х	\$20,000,000						
NC		х	\$20,000,000						
ND		Х	\$20,000,000						
ОН		х	\$20,000,000						
oĸ		х	\$20,000,000						
OR		х	\$20,000,000						
PA		Х	\$20,000,000						
RI		х	\$20,000,000						
sc		х	\$20,000,000						
\$D		х	\$20,000,000						
TN		Х	\$20,000,000						
TX		х	\$20,000,000						
UT		х	\$20,000,000						
VT		х	\$20,000,000						
VA		х	\$20,000,000						
WA		х	\$20,000,000						<u> </u>
wv		х	\$20,000,000						
WI		х	\$20,000,000						
WY		х	\$20,000,000	:					
PR		х	\$20,000,000						